

# PROJECT 0003 RECORD

1. DATE - TIME GROUP 4 Nov. 66 5/0001Z	2. LOCATION Bradford, Ohio two witnesses
3. SOURCE Civilian	10. CONCLUSION Aircraft(possible)
4. NUMBER OF OBJECTS one	
5. LENGTH OF OBSERVATION 4-5 minutes	11. BRIEF SUMMARY AND ANALYSIS Observers watched a orange-dull white object traveling toward the west. The object was compared to a light with a faint orange cast. It looked like the object was higher in altitude than normal jets. There was no sound heard during the observation.  The description is consistent with that of an aircraft observation.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE westward	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- ☒ c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- ☒ c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- ☒ a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- ☒ d. Snow on the ground
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- ☒ d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- ☒ b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

12. The edges of the object were:

- (Circle One)
- a. Fuzzy or blurred
  - ☒ b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |                                     |            |
|---|--------------------------------------|-------------------------------------|------------|
| a. Appear to stand still at any time?           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| b. Suddenly speed up and rush away at any time? | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes                                  | <input checked="" type="radio"/> No | Don't know |



4 Nov. 66

FTD (TDETR) *hl*  
Wright-Patterson AFB, Ohio 45433  
9 November 1966

*[Redacted]*  
*[Redacted]*  
Bradford, Ohio 45308

Dear Mr. *[Redacted]*

Reference your unidentified observation of 4 November 1966.  
The information which we have received is not sufficient for  
evaluation. Request you complete the attached FTD Form 164  
and return it in the envelope provided.

We wish to thank you for reporting your observation to the  
Air Force.

Sincerely,

*[Signature]*  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY  
TDETR  
Office of Research



# U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>4</u>      <u>Nov</u>      <u>1966</u>  Day      Month      Year </p>	<p>2. Time of day: <u>1900</u></p> <p style="text-align: center;">Hour      Minutes</p> <p>(Circle One):      A.M.      or      <u>P.M.</u></p>
<p>3. Time Zone:</p> <div style="display: flex; justify-content: space-between;"> <div> (Circle One): a. <u>Eastern</u>  b. Central  c. Mountain  d. Pacific  e. Other _____ </div> <div> (Circle One): a. Daylight Saving  <u>b. Standard</u> </div> </div>	
<p>4. Where were you when you saw the object?</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">   Nearest Postal Address </div> <div style="width: 30%;"> <u>BRADFORD</u>  City or Town </div> <div style="width: 30%;"> <u>(Miami) OHIO</u>  State or County </div> </div>	
<p>5. How long was object in sight? (Total Duration)</p> <div style="display: flex; justify-content: space-between;"> <div> a. Certain  b. Fairly certain </div> <div> <u>c. Not very sure</u>  <u>d. Just a guess</u> </div> </div> <p>5.1 How was time in sight determined? _____</p> <p>5.2 Was object in sight continuously?      Yes <u>✓</u>      No _____</p>	
<p>6. What was the condition of the sky?</p> <div style="display: flex; justify-content: space-between;"> <div> DAY  a. Bright  b. Cloudy </div> <div> NIGHT  <u>a. Bright</u> <u>DULL WHITE</u>  b. Cloudy </div> </div>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p style="text-align: center;"><u>N/A</u></p> <div style="display: flex; justify-content: space-between;"> <div> (Circle One): a. In front of you  b. In back of you  c. To your right </div> <div> d. To your left  e. Overhead  f. Don't remember </div> </div>	

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8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

NOT QUITE AS bright AS stars

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |     |    |            |
|---|-----|----|------------|
| a. Appear to stand still at any time?           | Yes | No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | No | Don't know |
| c. Break up into parts or explode?              | Yes | No | Don't know |
| d. Give off smoke?                              | Yes | No | Don't know |
| e. Change brightness?                           | Yes | No | Don't know |
| f. Change shape?                                | Yes | No | Don't know |
| g. Flash or flicker?                            | Yes | No | Don't know |
| h. Disappear and reappear?                      | Yes | No | Don't know |



14. Did the object disappear while you were watching it? If so, how?

NO

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind:

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of:

17. Tell in a few words the following things about the object:

a. Sound

NO

b. Color

DULL WHITE WITH ORANGE CAST

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

70° for horizon going east to west

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type) \_\_\_\_\_
- e. At sea
- f. Other \_\_\_\_\_

23. Were you (Circle One)

a. in the business section of a city?

b. In the residential section of a city? DOWN

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

25. Did you observe the object through any of the following?

a. Eyeglasses

Yes

No

e. Binoculars

Yes

No

b. Sun glasses

Yes

No

f. Telescope

Yes

No

c. Windshield

Yes

No

g. Theodolite

Yes

No

d. Window glass

Yes

No

h. Other \_\_\_\_\_

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.



14. Did the object disappear while you were watching it? If so, how?

NO

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind:

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of:

17. Tell in a few words the following things about the object:

a. Sound NO

b. Color DULL WHITE WITH ORANGE CAST

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

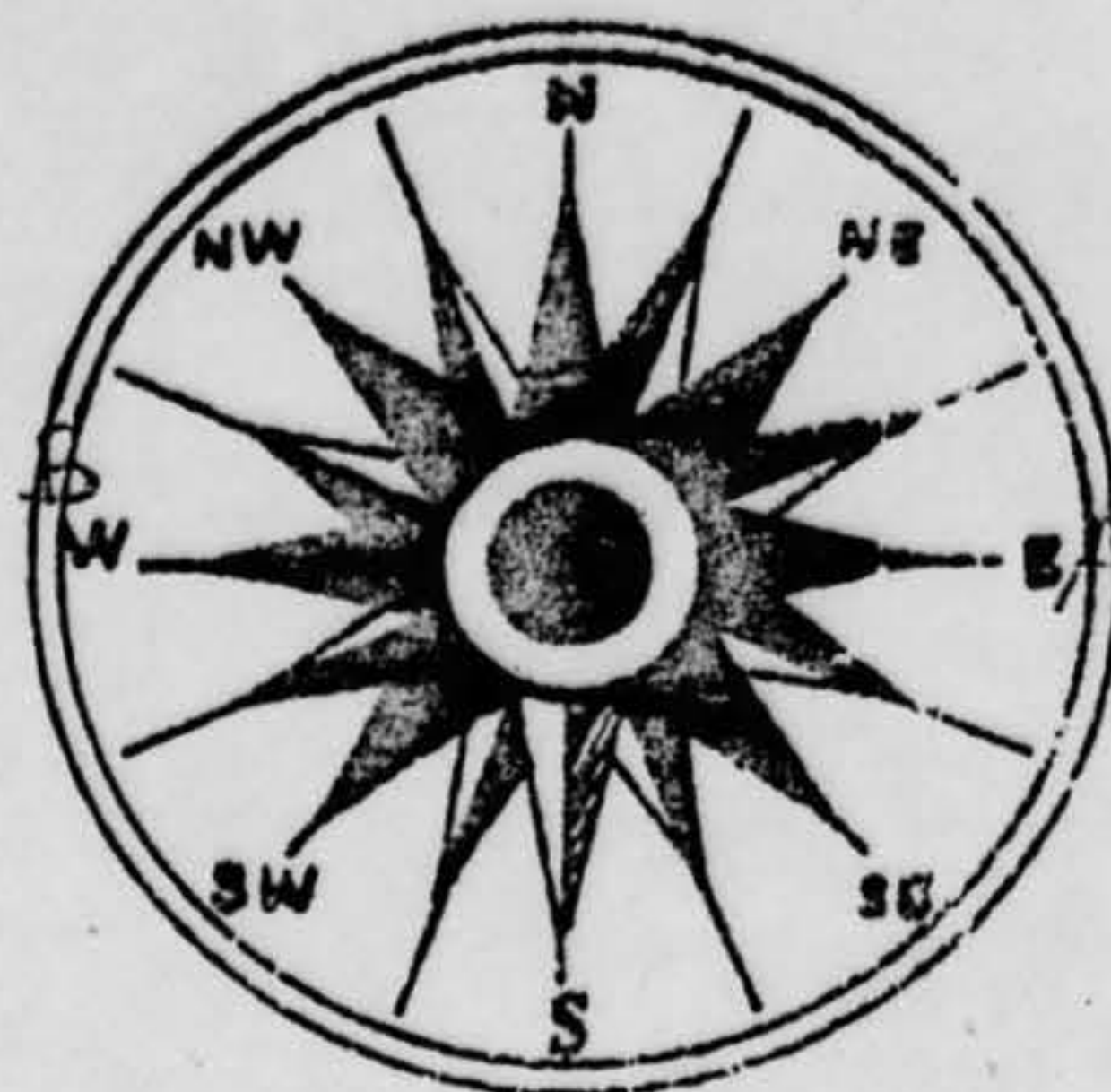
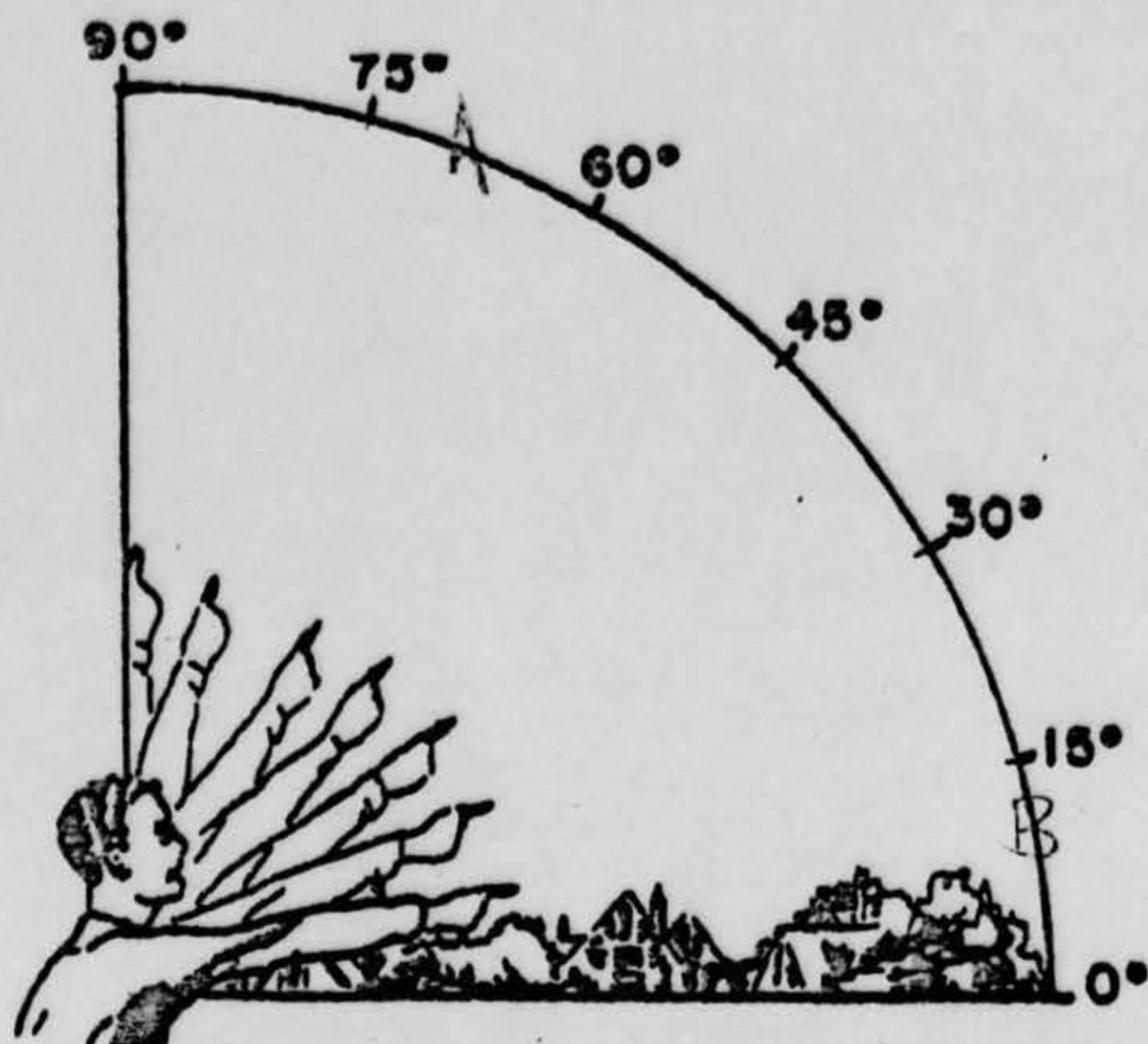
70° for horizon going east to west

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.



27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

29. IF there was MORE THAN ONE object, then how many were there? N/A  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.



30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

[REDACTED]  
[REDACTED]  
[REDACTED]

32. Please give the following information about yourself:

NAME

[REDACTED] [REDACTED] [REDACTED]

Last Name

First Name

Middle Name

ADDRESS

[REDACTED] [REDACTED] [REDACTED] OHIO

Street

City

Zone

State

TELEPHONE NUMBER

[REDACTED] AGE 16 SEX M

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

Day

Month

Year



34. Date you completed this questionnaire:

\_\_\_\_\_  
Day

\_\_\_\_\_  
Month

\_\_\_\_\_  
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

SIZE - FIVE OBJECTS COULD BE FITTED ONTO  
A MATCH HEAD



U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

4 Mar 1966  
Day Month Year

2. Time of day: 7         
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[REDACTED] FL BRADFORD MIAMI  
Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration)

4-5  
Hours Minutes Seconds

a. Certain  
b. Fairly certain  
c. Not very sure  
d. Just a guess

5.1 How was time in sight determined? by clock

5.2 Was object in sight continuously? Yes ✓ No \_\_\_\_\_

6. What was the condition of the sky?

DAY  
a. Bright  
b. Cloudy

NIGHT  
a. Bright  
b. Cloudy

clear is better because there was no moon

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you  
b. In back of you  
c. To your right  
d. To your left  
e. Overhead  
f. Don't remember



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow on the ground
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |            |           |            |
|---|------------|-----------|------------|
| a. Appear to stand still at any time?           | <u>Yes</u> | No        | Don't know |
| b. Suddenly speed up and rush away at any time? | <u>Yes</u> | No        | Don't know |
| c. Break up into parts or explode?              | Yes        | <u>No</u> | Don't know |
| d. Give off smoke?                              | Yes        | <u>No</u> | Don't know |
| e. Change brightness?                           | Yes        | <u>No</u> | Don't know |
| f. Change shape?                                | Yes        | <u>No</u> | Don't know |
| g. Flash or flicker?                            | Yes        | <u>No</u> | Don't know |
| h. Disappear and reappear?                      | Yes        | <u>No</u> | Don't know |



14. Did the object disappear while you were watching it? If so, how?

*no*

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

it moved behind:

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

in front of:

17. Tell in a few words the following things about the object:

a. Sound

*there was no sound*

b. Color

*it had a slight orange cast more than dull white*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*the object would have been covered, about 5 would fit in the match head*

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.

W



E

S



20. Do you think you can estimate the speed of the object?

(Circle One)

☒ Yes

No

IF you answered YES, then what speed would you estimate? *it spanned at 7" area in front of me in 10 sec.*

21. Do you think you can estimate how far away from you the object was?

(Circle One)

☒ Yes

No

IF you answered YES, then how far away would you say it was? *2-3 times higher than jets in this area*

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- ☒ c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other \_\_\_\_\_

23. Were you (Circle One)

- a. in the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other *very edge of town*

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

25. Did you observe the object through any of the following?

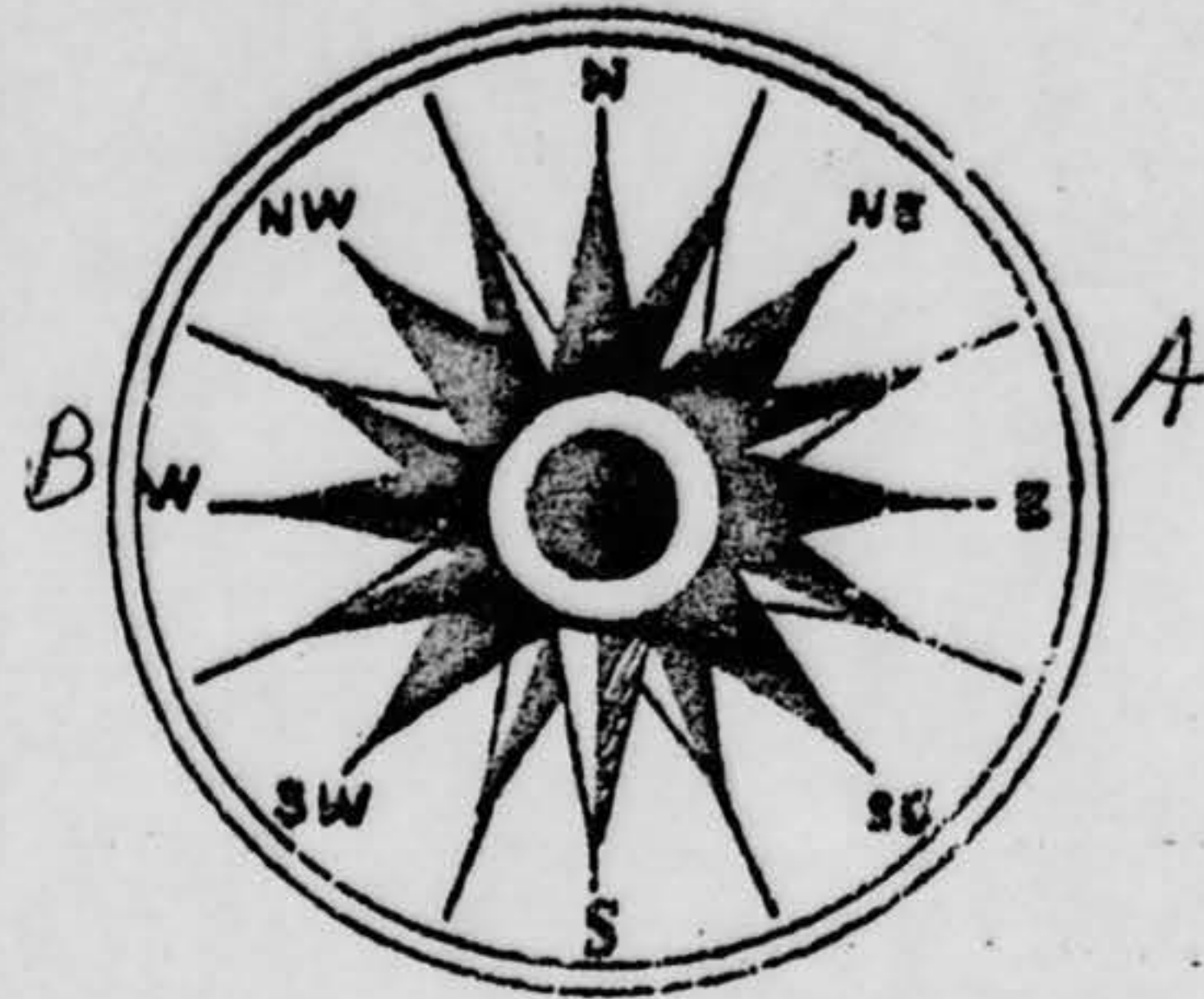
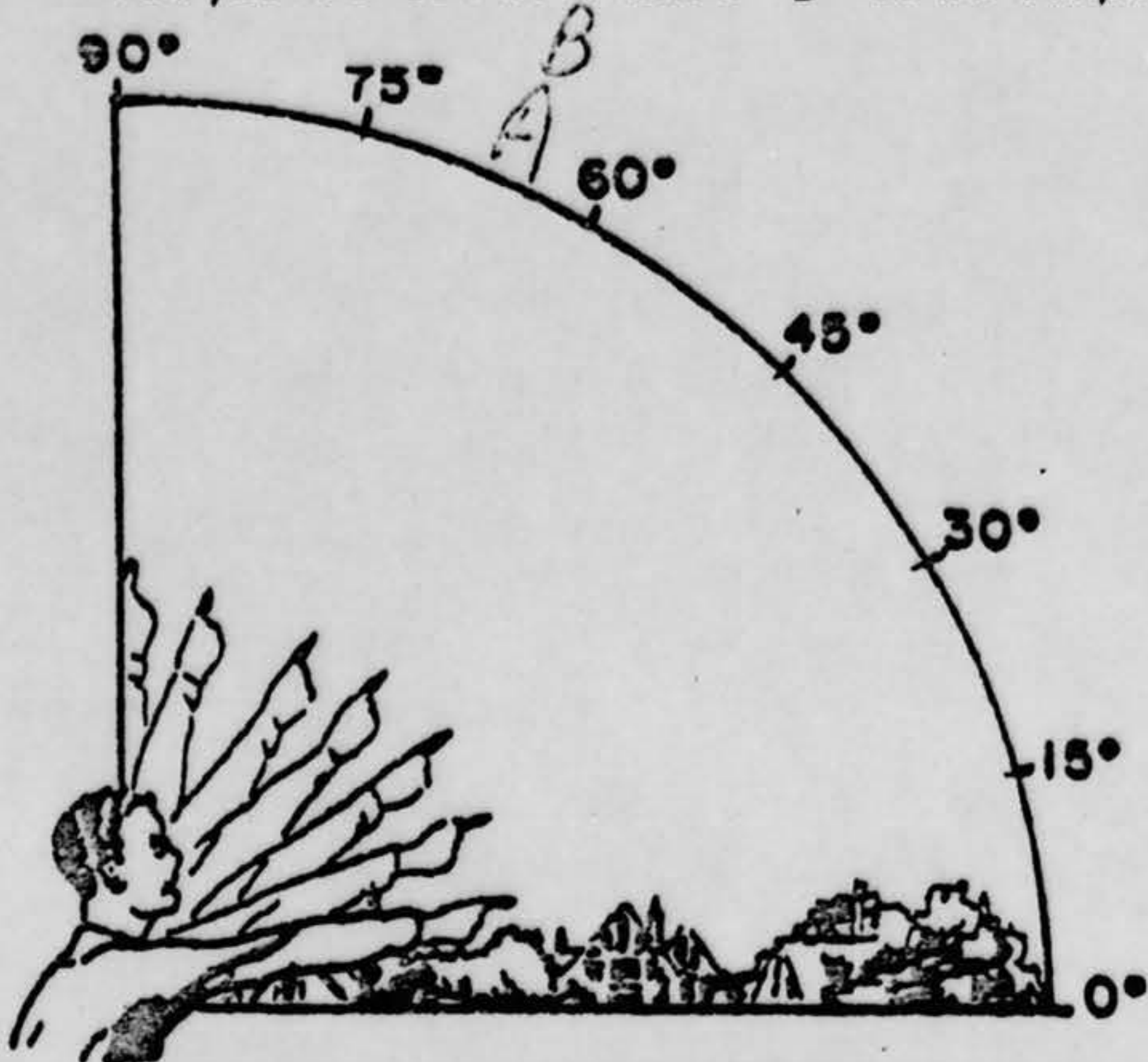
- |                 |                                      |    |               |  |    |
|-----------------|--------------------------------------|----|---------------|--|----|
| a. Eyeglasses   | <input checked="" type="radio"/> Yes | No | e. Binoculars | Yes  | No |
| b. Sun glasses  | Yes                                  | No | f. Telescope  | Yes  | No |
| c. Windshield   | Yes                                  | No | g. Theodolite | Yes  | No |
| d. Window glass | Yes                                  | No | h. Other      | <i>but I took them off to make sure it wasn't a reflection</i> |    |

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw

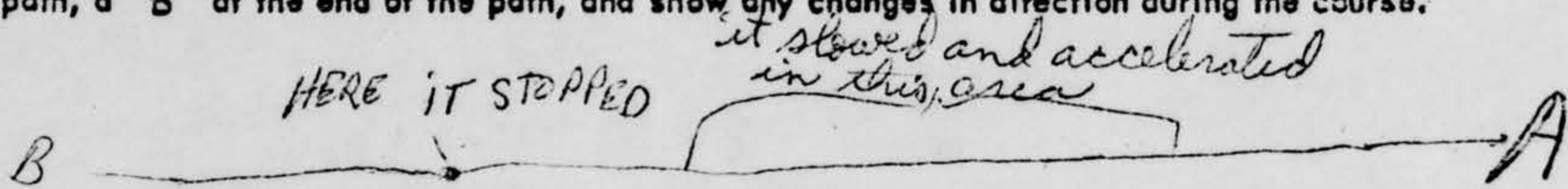
*a light with a faint orange cast*



27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_  
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.



30. Have you ever seen this, or a similar object before. If so give date or dates and location.

no

31. Was anyone else with you at the time you saw the object? (Circle One)

☒ Yes

☐ No

31.1 IF you answered YES, did they see the object too? (Circle One)

☒ Yes

☐ No

31.2 Please list their names and addresses:

~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~

BRADFORD, OHIO

32. Please give the following information about yourself:

NAME

~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~

Middle Name

ADDRESS

~~\_\_\_\_\_~~

BRADFORD

OHIO

Street

City

Zone

State

TELEPHONE NUMBER

~~\_\_\_\_\_~~

AGE

16

SEX

M

Indicate any additional information about yourself, including any special experience, which might be pertinent.

I have been class president two times (Freshman and junior year)  
I have been in scouting  
I was a member of the Future Scientists of America until it folded.  
I have maintained an A average in Science and Biology.  
And I have got a Superior rating on all science projects.

33. When and to whom did you report that you had seen the object?

Day 4

Month

1966

Year



34. Date you completed this questionnaire:

Nov  
Day

22  
Month

1966  
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.



# U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

4 Nov 1966  
Day Month Year

2. Time of day:

7         
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[REDACTED] MIAMI  
City or Town State or Country

5. How long was object in sight? (Total Duration)

4-5  
Hours Minutes Seconds

a. Certain  
b. Fairly certain

c. Not very sure  
d. Just a guess

5.1 How was time in sight determined?

by clock

5.2 Was object in sight continuously?

Yes ✓ No \_\_\_\_\_

6. What was the condition of the sky?

DAY  
a. Bright  
b. Cloudy

NIGHT  
a. Bright  
b. Cloudy

clear is better because  
there was no moon

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you  
b. In back of you  
c. To your right

d. To your left  
e. Overhead  
f. Don't remember